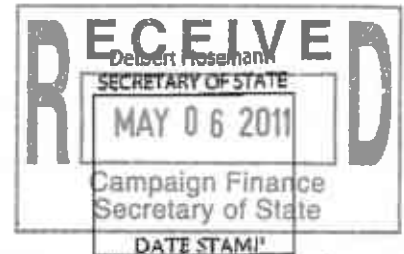


**Political Candidate
REPORT OF RECEIPTS AND DISBURSEMENTS
2011 Elections**



Name of Candidate William J. "Billy" McCoy
 Address 230 CR 1021 Rienzi MS 38865 County Prentiss/Alcorn
 Telephone 662-728-6434 Fax 662-728-3181
 Treasurer Kermit V. Jones, Jr. Email Address kvjonesjrca@bellsouth.net

Check here if above is different from previous report

- ☒ **May 10, 2011 Periodic Report** (January 1, 2011, through April 30, 2011) Mandatory
☐ **June 10, 2011 Periodic Report** (May 1, 2011, through May 31, 2011) Mandatory
☐ **July 8, 2011 Periodic Report** (June 1, 2011, through June 30, 2011) Mandatory
☐ **July 26, 2011 Pre-Election Report** (July 1, 2011, through July 23, 2011) Primary Candidates
☐ **August 16, 2011 Pre-Election Report** (July 24, 2011, through August 13, 2011) Runoff Candidates Only
☐ **October 10, 2011 Periodic Report** (July 24, 2011, through September 30, 2011) Mandatory
☐ **November 1, 2011 Pre-Election Report** (October 1, 2011, through October 23, 2011) Mandatory
☐ **November 22, 2011 Pre-Election Report** (October 30, 2011, through November 19, 2011) Runoff Candidates Only
☐ **January 10, 2012 Periodic Report** (October 30, 2011, through December 31, 2011) Mandatory
☐ **Termination Report** (Candidate will no longer accept contributions or make Campaign expenditures and has no outstanding campaign debt obligation)

IMPORTANT

- (1) Pre-Election reports are mandatory, even if no contributions or expenditures have occurred. In such case, the candidate shall submit a report indicating "0" (Zero) for total amount of reported contributions and expenditures during this period.
 (2) Until a Candidate files a Termination Report, annual and periodic reports must still be filed in accordance with Miss. Code Ann. § 23-15-807 (b) (ii) and (iii).
 (3) The receiving authority must be in actual receipt of the required reports by 5:00 p.m. on the reporting day. If the deadline falls on a weekend or a holiday, the office must be in actual receipt of the required reports by 5:00 p.m. on the first working day before the deadline. Faxed reports are acceptable.

REPORTED CONTRIBUTIONS AND

	Itemized + Non-Itemized = Beg Bal	This Period 65961.06	Calendar Year-To-Date
Total amount of contributions	\$ 1850.00 +\$ -0-	\$ 1850.00	\$ 1850.00
Total amount of disbursements	\$ 9052.33 +\$ 1253.36	\$ 20305.69	\$ 20305.69
Total amount of cash on hand		\$ 47505.37	

I certify that I have examined this report and to the best of my knowledge and belief it is true, accurate, and complete.

William J. McCoy
 Signature of Candidate

5-6-11
 Date

Authority: Refer to Miss. Code Ann. §23-15-801 (1972) et. seq. for statutory requirement.

Penalties: Failure to submit required reports, or failure to submit reports in accordance with statutory deadlines, or failure to submit valid reports shall result in fines of \$80 per day and / or prosecution in accordance with Miss. Code Ann. § 23-15-8-11 (1972).

SEND TO: 1. Candidates for Statewide, State district, multi-county and all legislative offices should return form to Secretary of State, Elections Division, P.O. Box 136, Jackson, MS 39205 or fax to 601-359-1499.
 2. Candidates for county wide and county district offices should return forms to their county Circuit Clerk.

505 12-10

Name of Candidate or Committee William J. "Billy" McCoyReporting period January 1, 2011 through April 30, 2011

ITEMIZED RECEIPTS

A. Source: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Mississippi Architects PAC</u>		<u>1 / 22 / 11</u>	\$ <u>1000.00</u>
Mailing Address <u>509 E Capitol St</u>		<u> </u> / <u> </u> / <u> </u>	\$
City, State, Zip Code <u>Jackson MS 39201</u>		<u> </u> / <u> </u> / <u> </u>	\$
Name of Employer (Required) <u>N/A</u>		<u> </u> / <u> </u> / <u> </u>	\$
Occupation (Required) <u>N/A</u>		Aggregate year-to-date	\$ <u>1000.00</u>
B. Source: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Nisource Inc PAC</u>		<u>1 / 22 / 11</u>	\$ <u>350.00</u>
Mailing Address <u>200 Civic Center Dr</u>		<u> </u> / <u> </u> / <u> </u>	\$
City, State, Zip Code <u>Columbus OH 43215</u>		<u> </u> / <u> </u> / <u> </u>	\$
Name of Employer (Required) <u>N/A</u>		<u> </u> / <u> </u> / <u> </u>	\$
Occupation (Required) <u>N/A</u>		Aggregate year-to-date	\$ <u>350.00</u>
C. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Greg Ward</u>		<u>4 / 25 / 11</u>	\$ <u>500.00</u>
Mailing Address <u>670 Hwy 4 West</u>		<u> </u> / <u> </u> / <u> </u>	\$
City, State, Zip Code <u>Ripley MS 38663</u>		<u> </u> / <u> </u> / <u> </u>	\$
Name of Employer (Required) <u>State of MS Legislature</u>		<u> </u> / <u> </u> / <u> </u>	\$
Occupation (Required) <u>State of MS Legislature</u>		Aggregate year-to-date	\$ <u>500.00</u>
D. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name _____		<u> </u> / <u> </u> / <u> </u>	\$
Mailing Address _____		<u> </u> / <u> </u> / <u> </u>	\$
City, State, Zip Code _____		<u> </u> / <u> </u> / <u> </u>	\$
Name of Employer (Required) _____		<u> </u> / <u> </u> / <u> </u>	\$
Occupation (Required) _____		Aggregate year-to-date	\$

SS04-05

Name of Candidate or Committee William J. "Billy" McCoy
 Reporting period January 1, 2011 through April 30, 2011

ITEMIZED DISBURSEMENTS

A. Full name Cassreino Consulting LLC	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 610 Salems Ct	1 / 4 / 11	\$ 3000.00
City, State, Zip Code Madison MS 39110	2 / 11 / 11 3 / 14 / 11	\$ 4000.00 4000.00
Purpose of Disbursement (Optional) Consultant	Aggregate Year-to-date	\$ 11000.00
B. Full name Shapley's	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 868 Central St	2 / 4 / 11	\$ 1028.55
City, State, Zip Code Ridgeland MS 39157	__ / __ / __	\$
Purpose of Disbursement (Optional) Advertising and promotion	Aggregate Year-to-date	\$ 1028.55
C. Full name Bill Lockett	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address P O Box 1000	2 / 15 / 11	\$ 1000.00
City, State, Zip Code Clarksdale MS 38614	__ / __ / __	\$
Purpose of Disbursement (Optional) Contribution	Aggregate Year-to-date	\$ 1000.00
D. Full name Booneville Jr Charity Aux	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 204 Honey Creek Road	2 / 7 / 11	\$ 300.00
City, State, Zip Code Booneville MS 38829	__ / __ / __	\$
Purpose of Disbursement (Optional) Contribution	Aggregate Year-to-date	\$ 300.00
E. Full name Jones & Jones CPA	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address P O Box 250	3 / 21 / 11	\$ 1102.40
City, State, Zip Code Booneville MS 38829	__ / __ / __	\$
Purpose of Disbursement (Optional) Accounting	Aggregate Year-to-date	\$ 1102.40
F. Full name Bill Miles Associates	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address P O Box 246	4 / 2 / 11	\$ 500.00
City, State, Zip Code Fulton MS 38842	__ / __ / __	\$
Purpose of Disbursement (Optional) Consultant	Aggregate Year-to-date	\$ 500.00

SS04-06

Name of Candidate or Committee William J. "Billy" McCoy
 Reporting period January 1, 2011 through April 30, 2011

ITEMIZED DISBURSEMENTS

A. Full name Robert McDuff Law Office	Date (Mo., Day, Year) <u>4 / 11 / 11</u>	Amount of each disbursement this period \$ 2000.00
Mailing Address 767 N Congress St	<u> </u> / <u> </u> / <u> </u>	\$
City, State, Zip Code Jackson MS 39202	<u> </u> / <u> </u> / <u> </u>	\$
Purpose of Disbursement (Optional) Legal	Aggregate Year-to-date	\$ 2000.00
B. Full name Marriott	Date (Mo., Day, Year) <u>4 / 16 / 11</u>	Amount of each disbursement this period \$ 820.98
Mailing Address 2660 Woodley Road NW	<u> </u> / <u> </u> / <u> </u>	\$
City, State, Zip Code Washington DC 20008	<u> </u> / <u> </u> / <u> </u>	\$
Purpose of Disbursement (Optional) Travel	Aggregate Year-to-date	\$ 820.98
C. Full name Southwest Airlines	Date (Mo., Day, Year) <u>4 / 16 / 11</u>	Amount of each disbursement this period \$ 525.40
Mailing Address P O Box 36647-1CR	<u> </u> / <u> </u> / <u> </u>	\$
City, State, Zip Code Dallas TX 75235	<u> </u> / <u> </u> / <u> </u>	\$
Purpose of Disbursement (Optional) Travel	Aggregate Year-to-date	\$ 525.40
D. Full name National Conference of State Legislatures	Date (Mo., Day, Year) <u>4 / 16 / 11</u>	Amount of each disbursement this period \$ 425.00
Mailing Address 444 North Capitol St NW Suite 515	<u> </u> / <u> </u> / <u> </u>	\$
City, State, Zip Code Washington DC 20001	<u> </u> / <u> </u> / <u> </u>	\$
Purpose of Disbursement (Optional) Conference fee	Aggregate Year-to-date	\$ 425.00
E. Full name Nisource Inc PAC	Date (Mo., Day, Year) <u>4 / 7 / 11</u>	Amount of each disbursement this period \$ 350.00
Mailing Address 200 Civic Center Dr	<u> </u> / <u> </u> / <u> </u>	\$
City, State, Zip Code Columbus OH 43215	<u> </u> / <u> </u> / <u> </u>	\$
Purpose of Disbursement (Optional) Stop Payment on Donation	Aggregate Year-to-date	\$ 350.00
F. Full name	Date (Mo., Day, Year) <u> </u> / <u> </u> / <u> </u>	Amount of each disbursement this period \$
Mailing Address	<u> </u> / <u> </u> / <u> </u>	\$
City, State, Zip Code	<u> </u> / <u> </u> / <u> </u>	\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$

SS04-06